| PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 1997 Application or Dock 1 Number 09/051013 | | | | | | | | | | |
|---|--|---|---------|---|------------------|--------------|-------------------------|-------|---------------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | ALL ENTITY | OR | | THAN |
| FOR | | NUMBE | R FILED | | NUMBER EXTRA | | E FEE | | RATE | FEN |
| BASIC FEE | | | | | | | 395.0 | OR | | 160.Kg |
| TOTAL CLAIMS | | 14 | minus | 20= | 7 | x\$11 | = | OR | x\$22= | 494 |
| INDEPENDENT CLAIMS | | ums | | ıs 3 = • | | x41 | | OR | x82= | 11/ |
| MULT | IPLE DEPEND | ENT CLAIM PRE | SENT . | | +135 | ; <u> </u> | OR | +270= | | |
| 4 If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | TOT | | OR | TOTAL | 1314 |
| | CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | SM | ALL ENTITY | OR | | R THAN ENTITY |
| ENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RAT | ADDI- TIONA FEE | | RATE | ADDI- TIONAL FEE |
| MENDMENT | Total | . 23 | Minus | " 47 | = Ø | x\$11 | = | OR | x\$22= | |
| AME | Independent | • 1 | Minus | ··· 3 | = Ø | x41 | = | OR | x82= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | +135 | j= | OR | +270= | |
| (Column 1) (Column 2) (Column 3) | | | | | | ADDIT. | | OR | TOTAL ADDIT. FEE | |
| ENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RAT | E ADDI- TIONA FEE | | RATE | ADDI- TIONAL FEE |
| ENDMENT | Total | • | Minus | ** | = | x\$1 | l= | OR | x\$22= | |
| AMEN | Independent | • | Minus | *** | = | x41 | = | OR | x82= | |
| ∢ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | +13 | 5= | OR | +270= | |
| (Column 1) (Column 2) (Column 3) | | | | | | TO ADDIT. | TAL | OR | TOTAL ADDIT, FEE | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | b | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RAT | ADDI- TIONA FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • | Minus | ** | = | x\$1 | i == | OR | x\$22= | |
| | Independent | • | Minus | *** | = | x41 | = | OR | x82= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | 5= | OR | +270= | |
| "If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | |